

## MEETING MINUTES

<b>Project Name:</b> IPRS	<b>Doc. Version No:</b> 1.0	<b>Status:</b> Final
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**Meeting Name:** IPRS Core Team Meeting  
**Facilitator:** Eric Johnson, DMH  
**Scribe:** Debra Haraway  
**Date:** 2/14/07  
**Time:** 10:30 – 11:30 a.m.  
**Location:** Hargrove, Conference Room D

### IPRS Core Team Attendees:

x Rick Kretschmer  
 x Cheryl McQueen  
 Gary Imes  
 Joyce Sims  
 x Rick Debell  
 x Carlisa Stallings  
 x Thelma Hayter  
 x Eric Johnson  
 x Tim Sullivan

### Others:

x Jamie Herubin  
 x Sandy Flores  
 x Mike Frost  
 x Myran Harris  
 x Chris Ferell  
 x Deborah LeBlanc

### Attendees:

x Alamance-Caswell	x Onslow-Carteret
x Albemarle	x OPC
x Catawba	x Pathways
x Centerpoint	x Pitt
x Crossroads	x Roanoke-Chowan
x Cumberland	x Rockingham
x Durham	x Sand hills Center
x Eastpointe	x SE Center
x Edgecombe-Nash	x SE Regional
Five – County MHA	x Smoky Mountain
x Foothills	x Tideland
x Guilford	x Wake
x Johnston	x Western Highlands
x Mecklenburg	x Wilson-Greene
x Neuse	
x New River	

**Attendees:**

**Item No. Topics**

1. Roll call
2. Please mute phones or refrain from excess activity to help with communications. Please state your name and which "area program" you are from when you speak. **Also, please do not place IPRS Core Team call on hold because of potential distraction to call discussion.**
3. Upcoming Check-writes (cut-off dates) – February 15, 22, March 1, 8, 15, 22
4. Agenda items
  - **Beta Test (NPI) Requirements Review**
  - **100 records/LME/submission**
  - **Commence March (BOM)**
  - **PT Screen (Zip and NPI)**
  - **Beta Test (834) Requirements Review**
  - **20 records/LME/submission**
  - **Commence April (BOM)**
  - Reminder...Send in NPI data
  - IPRS Questions or Concerns
  - MMIS Updates – Tim Sullivan & Chris Ferrell
  - NPI Questions/Concerns
  - Medicaid Questions or Concerns
5. DMH and/or EDS concluding remarks.
  - a. For **North Carolina Medicaid** claim questions / inquiries, please call EDS Provider Services at 1-800-688-6696 or 1-919-851-8888 and enter the appropriate extension listed below or 0 for the operator.
  - i. Physician phone analyst (i.e. Independent mental Health Providers – 4706
  - ii. Hospital phone analyst (i.e. Enhanced Service Providers / LMEs) - 4704
6. Roll Call Updates

Next Meeting: February 21, 2007

For assistance with IPRS claims, adjustments, R2Web, or accessing applications, etc,  
 Call the IPRS Help Desk – 1-800-688-6696, ext 53355 or 919-816-4355  
 , M-F, 8 a.m.-4:30 p.m., excluding holidays.

IPRS Question and Answer email address – [iprs.qanda@ncmail.net](mailto:iprs.qanda@ncmail.net)

ADMINISTRATION NOTES (10:30 a.m. AREA PROGRAMS CONFERENCE CALL)	
Item No.	Topics
1.	Roll Call
2.	Please mute phones or refrain from excess activity to help with communications. Please state your name and which "area program" you are from when you speak. <b>Also, please do not place IPRS Core Team call on hold because of potential distraction to call discussion.</b>
3.	<b>Upcoming Check-writes</b> February 15, 22, March 1, 8, 15, 22 (Eric): We had a check-write this weekend- it was the first check-write cutoff on a Thursday instead of Friday. Are there any questions. No Our next check-write cutoff date is Thursday 2/15/07.
4.	<p><b>Beta Test (NPI) Requirements Review-</b> We specified 100 records for the 837 transactions per LME per submission. We will have several submissions of batch records and are planning for it to begin sometime in March. You will be able to submit your 837 transactions with the NPI data so they will be considered by the mapping scenarios that we have developed. This will be a full-cycle test: you will receive an 835 back when you submit these because they will go through the whole process not just the mapping solution. The 835 will be offered in the new NPI format. You need to be sure that the attending providers that you submit claims for (if they are typical) have submitted their NPI data to DMA or you have entered them into IPRS so that everything will work the way it was designed. Zip codes need to be updated for both the billing and the attending provider. If you have not given billing provider information to me, please send the information into Q&amp;A. Ten (10) LMEs have volunteered for beta testing. We are encouraging everyone to participate. Send an email to Q&amp;A if you are interested in being a beta tester.</p> <p>(Q) (Tom-WH): Last time we did the beta testing there were reports on IPRS R2W (IPDR2000 RA) that we could view through with a test log-in. Will that work the same this time?</p> <p>(A) Yes the IPDR2000 will be out there in the test region to view.</p> <p>(Gina from Catawba): (Q) Since we will be getting an 835 back does that mean that all claims will be going through the test system and would we have to resubmit over to the live system?</p> <p>(A) Yes, this is only a test; you will have to resubmit these claims into the production system to get paid for them.</p> <p>(Tom-WH): (Q) Last time it seems like it went through a format test and once it went through the format system it went through the adjudication process. Is that correct?</p> <p>(A) Yes that will still take place. We want to make sure that your 837's are in the correct format before we take them through a test adjudication cycle.</p> <p>(Tom-WH): (Q) As we are testing and we have problems with our format, last time it seems like someone called us and shared the results with us. Can we expect that same kind of communication?</p> <p>(A) This is a little different because the 837 mapping stages have already moved to production. Just follow the process by sending the same format test in to the ECS address. We will send out an alert with the information. You can send that in for a format test and if your claims are making it through now you shouldn't have any problems because the only change is sending the NPI segments instead of sending the legacy number.</p> <p>(Gloria-Tideland): (Q) Will there be an edit on the dates of service that we are sending in for testing?</p> <p>(A) The only edit will be the timely filing.</p> <p>(Stewart-Onslow): (Q) Is it too late to be on the beta test list? Do I just email it to Q&amp;A?</p>

	(A) Its not too late. Yes, email to Q&A.
5.	<b>PT Screen (Zip and NPI)</b> (Mike-EDS): Last week, we reported issues with zip codes, NPI and error messages. A fix for that screen did go in on Thursday February 8th. This screen should be functioning properly now. If you are still having problems send an email to Q&A and we will look into it right away. The other screen is the eligibility screen. Several of you have experienced problems keying in your "local 11 digit" ID and getting a "not found" message. We reported last week that an alert went out and we are still looking into this issue. We hope to have a resolution quickly. As a reminder there is a work-around: access the cross reference screen and enter your "local 11 digit" ID. Once the base ID comes up you can click on that base ID and see the enrollment information for that client. We will keep you posted on the progress.
6.	<b>Beta Test (834) Requirements Review</b> (Cheryl): We have finally freed up our resources and gotten our 834 preliminarily tested. We are looking to do the 834 beta testing in the month of April. As a reminder the changes to this were to add the ethnicity, race and language information so that you can perform your cross referencing in batch and not have to do it on-line. In the month of April we will be conducting the 834 beta testing. We would like to get one volunteer for each vendor. Gilford and Johnston have already volunteered. This will be 20 records per submission and we want to test "adds" and "changes" to client eligibility. In the "add" process we need for at least one consumer to have a cross reference so that we can make sure that the cross reference function is correct. If you are interested in volunteering, please send an email to Q&A and let us know you wish to be a beta tester for 834. Please be specific as to which: 834 or NPI, or both. (Thelma): If you are merging client records it would be good to be able to cross reference through batch. So if you are an LME that is planning on merging in July it would be nice if you could help out testing on the 834. Last week we discussed the 90862 that was going to be added to the crisis services pop group and it will be added for this week's check-write and the effective date of service is 7/1/06.
7.	<b>IPRS questions or concerns-</b> (Eastpointe): (Q) Is the IPRS array of services that is on the web site up to date? (A) Yes. (Victoria-Tideland): (Q) Should we be billing IPRS the developmental therapy code H2014HM or should we be billing the YP code? (A) There is no YP code for developmental therapy. What happens is that with any procedure code that has a modifier, when that comes into IPRS it gets cross referenced to a YP9** code and then we use that code for all internal processing. You need to submit your claim with H2014 and the appropriate modifier. (Susan-Centerpoint): (Q) If or when will you be ready to receive the GT modifier for telemedicine? (A) It is a policy that is being implemented by both DMH and DMA. We have the draft policy. If you have questions, go to the DMA web site to submit your questions. Hopefully this will be approved sometime in March but we have not heard any firm dates.
8.	<b>Medicaid Questions or Concerns</b> (Kim-Neuse) (Q): If the residential provider has their 66 number are they able to bill themselves? (A): If the residential provider (enrolled with Medicaid) is endorsed and

	<p>enrolled they should be sending their claims directly to Medicaid. For those providers who are endorsed by the LME but not yet enrolled, the LME can submit those claims to Medicaid. The LME is not supposed to bill for those providers who did not become endorsed by December 18<sup>th</sup>.</p> <p>(Q): Are those numbers published on the IPRS site?</p> <p>((A) Yes they are on the IPVR0552 report.</p> <p>(Tom-WH): (Q) I have a provider that contacted Value Options asking the status of their residential authorization. Value Options expressed to them that there is a back log. The billing part is right, but without the authorization Western Highlands won't pay the provider. I don't think it is right that Value Options leads providers to believe that the LME is going to pay for those services without an authorization, unless EDS is going to lift the authorization edit?</p> <p>(A) We can't lift the services edit without authorization because we need to do our internal pricing. Tim will follow up on this issue.</p> <p>(Thelma): Please send in your detailed information on complaints about Value Options to <a href="mailto:ChristinaCarter@NCmail.net">ChristinaCarter@NCmail.net</a> also copy Q&amp;A and Dick Oliver.</p> <p>(Tim S.): CDSA Update: DMA is still reviewing the list of codes and will be expanding it.</p> <p>(Tom-WH): (Q) Still some confusion around CDSA. Please offer a resource for this information?</p> <p>(A) We don't know if there is anything out there that would deal with this issue.</p> <p>(Tim): We will talk to DMA clinical policy and try to obtain the information for you.</p>
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